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BOOK 214 PAGE 924

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BY Kerrie Hubbard

SEP 21 1 27 PM '01
M. H. OLSON
AUDITOR
GARY H. OLSON

Return Address:

KERRIE HUBBARD
PO Box 2873
Clackamas, OR 97015

Index
Entered 12
Address
Fined
Tabled

REVOCATION OF POWER OF ATTORNEY

Indexing information required by the Washington State Auditor's Recorder's Office, (RCW 36.14 and RCW 65.04) 1/97:
Reference # (if applicable): AF # 135314 Vol. 189 Pg 892 (please print last name first)
Grantor(s) (Principal): (1) KERRIE K HUBBARD (2)
Grantee(s) (Attorney in Fact): (1) the public (2)
Add'l. on pg _____ Legal Description (abbreviated):
Add'l. legal is on pg _____ Assessor's Property Tax Parcel / Account # _____

KNOW ALL PERSONS BY THESE PRESENTS: That whereas, KERRIE K HUBBARD did, in and by power of attorney dated the 14th day of MAY 1998 constitute and appoint DENISE MCGRAH my true and lawful attorney for me and in my name to _____

As by said power of attorney appears:
Now therefore I the said KERRIE K HUBBARD by these presents do hereby revoke, countermand, annul, and make void, the same power of attorney dated the 14th day of MAY 1998, and all power therein and thereby, or in any manner given or intended to be given the said DENISE MCGRAH

In Witness Whereof, I have hereunto set my hand this 21st day of September 2001.

STATE OF WASHINGTON.

County of Skamania

SS. (INDIVIDUAL ACKNOWLEDGEMENT)

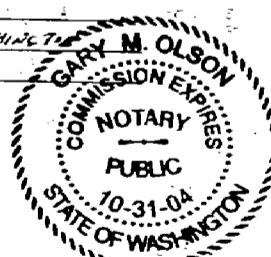
I certify that I know or have satisfactory evidence that KERRIE K HUBBARD is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 21 day of Sept 2001.

Print Name Gary M. Olson

Notary Public in and for the State of WASHINGTON

My appointment expires: 10-31-04



REVOCATION OF POWER OF ATTORNEY
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